



Dear Employee:

Welcome to **EMPLOYEE ASSISTANCE**. We will be meeting for about an hour to discuss any issues of concern to you. There is no fee to you for any of your contacts with EA.

Please take a few moments to complete this information before we meet. This information is needed for your **EA CONFIDENTIAL** file. This information does **NOT** become part of your Corporate Health or Human Resource file. It is only for EA use in working with you, or to expedite a referral **WITH YOUR PERMISSION**.

The information contained on the third page will be used anonymously to compile statistical data about those persons using the program. Your name will not be attached to it in any way. Your cooperation and accuracy will aid in developing our future program design.

Thank you for your cooperation. Please return these forms to the receptionist and someone will be with you shortly.

Employee Assistance Staff

Name: Deborah Ann Moss Date: 2-15-17  
Home Address: 63 Salem Crt. Hinckley 44233  
Home Phone: (330) 225-9597 Date of Birth: 05/03/1965  
Emergency Contact: Deb moss Contact Phone: (330) 591-0766  
Hospital/Facility: Parma Medical Department: BCOA  
Supervisor (optional): Holly Holly Position: Rehabilitation Therapist  
Duty Phone: 440-743-4335

Health Plan Coverage: Anthem  Yes  No  
Other Insurance?

May we contact you at work?  Yes  No  
May we contact you at home?  Yes  No  
Referral Source: \_\_\_\_\_

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--- FOR EAP USE ---when referral is made via Anthem ---

Provider: \_\_\_\_\_ No. of Visits: \_\_\_\_\_ Authorization #: \_\_\_\_\_

NAME: Deborah Ann Moss DATE: 2-15-17  
SS#: [REDACTED] PHONE: (3) 925-9597 WORK: (4) 743-4335

**1. MARITAL STATUS: (Check One)**

Single  Married  Divorced  Separated  Widowed  Living w/Someone

Spouse's/partner's name: Bill Moss

**2. CHILDREN: (Complete Only If You Have Children)**

<u>Name of Child</u>	<u>Age</u>	<u>Does Child Live With You?</u>
Kyle	19	<input checked="" type="radio"/> Yes      No
Tyler	14	<input checked="" type="radio"/> Yes      No
		<input type="radio"/> Yes      No

3. Briefly describe your problem and your reason for contacting us at this time:

Referral by manager Ch - Tarma

4. Check the areas that have been affected by this problem:

<ul style="list-style-type: none"><li><input type="checkbox"/> Marriage/Partner</li><li><input type="checkbox"/> Family/Friendships</li><li><input type="checkbox"/> Job/School Performance</li></ul>	<ul style="list-style-type: none"><li><input type="checkbox"/> Emotional/Physical Health</li><li><input type="checkbox"/> Financial Situation</li><li><input type="checkbox"/> Legal Situation</li></ul>
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Please explain:

5. What counseling or treatment have you had before?

Was it helpful? { } Yes { } No

6. What other ways have you tried to handle this problem?

10. *What is the primary purpose of the following statement?*

UNIVERSITY HOSPITALS EAP DEAR EMPLOYEE LETTER  
SADHES-SafetyOffice\PRINTING\_Quotes&Orders\EAP\_Orders\Forms\Dear Employee letter.pdf  
Revised 03/09

Year \_\_\_\_\_

### EA UTILIZATION

The information on this form is anonymous and is kept strictly confidential. It is used solely for maintaining statistical records. Please respond by placing a check in the appropriate box for each category.

#### I HAVE BEEN TO EAP BEFORE

01  Yes 02  No

#### YOUR PRESENT JOB STATUS

01  Employee  
02  Family member of employee  
03  Retiree  
04  Other

#### I WAS REFERRED BY

01  Self  
02  Co-worker  
03  Employee Relations  
04  Employee Advisor  
05  Supervisor Suggestion  
06  Mandatory Supervisory Referral  
07  Other, please specify \_\_\_\_\_

#### SEX

01  Female 02  Male

#### RACE

01  Caucasian  
02  African American  
03  Hispanic  
04  Native American  
05  Asian or Other

#### MARITAL STATUS

01  Single  
02  Married  
03  Separated  
04  Divorced  
05  Widowed  
06  Co-habitation

#### EDUCATION

01  High School Graduate or GED  
02  Some College  
03  College Graduate  
04  Some Graduate School  
05  Graduate Degree

#### EMPLOYMENT STATUS

01  Full-time 02  Part-time

#### I HAVE HAD THE FOLLOWING CORRECTIVE ACTION IN THE PAST TWO YEARS

01  Confirmation of Counseling  
02  Warning  
03  Suspension or Final Warning  
04  Discharge  
05  I Resigned  
06  No Corrective Action.

#### OCCUPATIONAL STATUS

01  Executive  
02  Manager  
03  Supervisor  
04  Regular Salaried  
05  Regular Hourly  
06  Retiree

#### LENGTH OF SERVICE

01  Under 1 year  
02  1-3 years  
03  4-6 years  
04  7-9 years  
05  10-15 years  
06  16+ years

#### SHIFT

01  Days  
02  Evenings  
03  Nights  
04  Rotating  
05  Other

#### SALARY

01  Under 10,000  
02  10,000-14,999  
03  15,000-19,999  
04  20,000-24,999  
05  25,000-29,999  
06  30,000-39,999  
07  40,000-49,999  
08  50,000+

#### SUBSIDIARY/HOSPITAL

01  UHCMC  
02  UH - Bedford  
03  UH - Brown Memorial  
04  UH - Chagrin Hglns  
05  UH - Conneaut  
06  UH - Extended Care  
07  UH - Geauga  
08  UH - Geneva  
09  UH - Home Care Services  
10  UH - Richmond  
11  UH - UHMG  
12  UHMSO



## Employee Assistance Intake Form

Date: 2-15-17  
Employee: Darbie Moss  
EAP Counselor: Karen Bachman  
Phone:

Type of Referral:  
A: Self  
B: Tier I Mandatory  
C: Tier II Mandatory  
Supervisor: Kathy Holliday  
Supervisor Phone:

### 1.) Presenting Problems:

FFD tier 1 med due to visual limitations concern over being able to perform functions of job  
in NC tx ongoing psych unit, with the 20yrs dx Stargardt syndrome (loss, 10-11 losing

### 2.) Psychiatric & Substance Abuse Hx (current and past):

Psychiatric Tx Inpatient	Yes	No
Psychiatric Tx Outpatient	Yes	No
Suicidal/Homicidal Ideation	Yes	No
Domestic violence	Yes	No
Child abuse	Yes	No
Sexual abuse	Yes	No
Affective disorder	Yes	No
Anxiety disorder	Yes	No
Evidence of psychosis	Yes	No
Substance Abuse/Alcoholism	Yes	No

### 3.) Medical Hx (current and past):

Stargardt syndrome lost central vision still has peripheral vision, vision is 20/200 since 10-11 yo

Medications/Psych Medications

### 4.) Family Psychiatric & Substance Abuse Hx (current and past):

<u>MA</u>
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### 5.) Background Information, Home Environment, Social Support:

Hancock Women Club, travel, Italy Oct - 25th Ann.

Dancing, Church

Mom+dad Native NV bto siste, hubs from all local chs.

Colombia VA

### 6.) Relationship Hx/Marital/Sexual/Social Factors (current and past):

met thru dating Service man, mania 25 2 yrs 19 TSA agent, NYO junior High  
Spartan hand youth Palma School

### 7.) Educational & Employment Hx/Problems/Stressors (current and past):

REC + Leisure Services concentration in therapeutic rec not cert. cat  
81 Back tent,

### 8.) Legal/Financial Problems:

own home NTI sym

#### INDIVIDUAL CLIENT PSYCHO-SOCIAL-EMOTIONAL-STATUS

General Appearance:	appropriate	inappropriate (specify):	
Dress:	appropriate	meticulous, inappropriate, eccentric, seductive, slovenly, dirty	
Interview behavior:	appropriate	angry, suspicious, silly, evasive, sensitive, impulsive, passive-aggressive; withdrawn, naïve, uncooperative, demanding, negative, seductive, defensive, manipulative, hostile, dramatic	
Motor behavior:	appropriate	restless, agitated, tics, tremor, listless, slow	
Speech:	appropriate	excessive, loud, soft, slurred, stuttering, repetitious, mute, circumstantial, excessively irrelevant detail	
Thought:	appropriate	blocking, tangential, perseverance, indecision, flight of ideas, loose association, grandiose, hallucination, delusions, illusions	
Mood:	appropriate	sad, depressed, anxious, angry, irritable, elated, labile, dysphoric, euphoric	
Affect:	appropriate	constricted, (normal range) appropriate to context, flat, shallow	
Orientation:	time place person	yes yes yes	no no no
Intellectual level:	normal	above normal	below normal
Memory:	good	fair	poor
Insight:	good	fair	poor
Judgment:	good	fair	poor

**Impressions/Recommendations/Follow-up:**

(Client cooperative skills and paid 20 yrs as job works) CBSVI (large monitor Close Circuit TV, new key board against abusers can't see other staff + pts voice facial expression) but has always been this way. News groups solo agreeable PCP to PCP + dermatologist. The Employee Health program care coordinator + dis manage. Statist Shutter helps Shutter fully: wiping home costs + clean his colonial home - adapts by memorizing recipes to cook, volunteer read email 1 week with new copies, flat screen can't use now. NP to flu a PCP + dermatologist @ Cole Eye Inst. tube acc. Med FFD

Vincent Kohlbacher, LCSW, CEDS  
Clinician

Date

2-15-17